

Month/Year: _____ **Days 1 - 15**

SSV Pin:

Instructions: Place an "X" in the box that corresponds with the temperature. The shaded zones represent unacceptable temperature ranges. **If the temperature recorded is in the shaded zone:** 1. Store the vaccine under proper conditions as quickly as possible, 2. Call the vaccine manufacturer(s) to determine whether the potency of the vaccine(s) has been compromised, 3. Document the action taken on the "Vaccine Storage Troubleshooting Record" and forward a copy to the RIDOH at 401-222-3805 (Fax). The RIDOH may request copies of additional documentation (i.e. wheel charts) to verify that the information reported below is accurate and factual. Call the immunization program at the health department for further assistance: (401) 222-4643/5988.

Day of Month		1		2		3		4		5		6		7		8		9		10		11		12		13		14		15	
Exact Time																															
*F Temp		am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm
Refrigerator Temperature Range	≥9.5*	Take immediate action if temperature is in the shaded area.																													
	9.0*	Complete and submit the "Vaccine Storage Troubleshooting Record"																													
	8.5*																														
	8.0*																														
	7.5*																														
	7.0*																														
	6.5*																														
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	2.5*																														
	2.0*																														
	1.5*																														
1.0*	Take immediate action if temperature is in the shaded area. Complete and submit the "Vaccine Storage Troubleshooting Record".																														
0.5*																															
0.0*																															
-0.5*																															
≤-1.0*																															
Freezer	≥-12*	"Vaccine Storage Troubleshooting Record".																													
	-13*																														
	-14*																														
	-15*																														
	-16*																														
	≤-17*																														
Staff Initials																															

Month/Year: Days 16 - 31

Practice Name: _____ **SSV Pin:** _____

***Instructions:** Place an "X" in the box that corresponds with the temperature. The shaded zones represent unacceptable temperature ranges.
If the temperature recorded is in the shaded zone: 1. Store the vaccine under proper conditions as quickly as possible, 2. Call the vaccine manufacturer(s) to determine whether the potency of the vaccine(s) has been compromised, 3. Document the action taken on the "Vaccine Storage Troubleshooting Record" and forward a copy to the RIDOH at 401-222-3805 (Fax).
 The RIDOH may request copies of additional documentation (i.e. wheel charts) to verify that the information reported below is accurate and factual.
 Call the immunization program at the health department for further assistance: (401) 222-4643/5988.

Day of Month		16		17		18		19		20		21		22		23		24		25		26		27		28		29		30		31	
Exact Time																																	
*F Temp		am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm	am	pm		
Refrigerator Temperature Range	>9.5*	Take immediate action if temperature is in the shaded area.																															
	9.0*	Complete and submit the "Vaccine Storage Troubleshooting Record"																															
	8.5*																																
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1.0*	Take immediate action if temperature is in the shaded area. Complete and submit the																																
0.5*	the shaded area. Complete and submit the																																
0.0*																																	
-0.5*																																	
≤-1.0*																																	
Freezer	>-12*	"Vaccine Storage Troubleshooting Record".																															
	-13*																																
	-14*																																
	-15*																																
	-16*																																
	≤-17*																																
Staff Initials																																	

Vaccine Storage Troubleshooting Record

Month/Year: _____

Practice Name: _____

SSV Pin: _____

[illegible]